

FRESNO POLICE DEPARTMENT CITIZEN'S POLICE ACADEMY ENROLLMENT APPLICATION

Name:	(Middle)	(Last)	
Previous Names (if Applicable)		· /	
Address:			
Address:		(City)	(State) (zip)
Phone: Home:	Work:	Cell/Alt.	:
E-mail Address:	Driver License Number:		
In case of emergency, contact:(Name, Address, Phone Number & Relationship)			
Place of Business and Occupation:			
Are you a member of any community	groups or civic orga	anizations?	
What interests you in attending the Cit	tizens' Police Acad	emy?	
How did you hear about the Citizens'	Police Academy?		
Potential candidates for the Citizens' Poli • Minimum of 18 years	s of age	eet the following requ	uirements:
Live or work in the CHave no felony convi	•		
Have no misdemeand	or convictions within	one year of applicati	on
• Not be on parole or p Final approval is at the discretion of the F		nent.	
There is a \$25.00 materials fee for the clapayable to: FPNWA -CPA. If you are not enrollment fee will be returned to you.			
Your signature on this form authorizes the purposes of admission to the Citizens' Po		rtment to perform a o	criminal history check for
Signature:		Date	
Mail completed application and your \$25	.00 check to:	Fresno Police Dep Attn: Lindsay Hug P.O. Box 1271	partment ghes, Special Projects Unit

Fresno, CA 93715

(559)621-2349 (559)488-1010 Fax